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| OSTROLENK F.  | ABER GERB & SOF<br>F THE AMERICAS<br>100368403  | FEN OCT 3  | 1 2005  | )                     | I hereby certify that t<br>States Postal Service<br>addressed to the Ma   | ertificate of Mailing or Tran<br>his Fee(s) Transmittal is bein<br>with sufficient postage for fi<br>il Stop ISSUE FEE address<br>PTO (571) 273-2885, on the | ng deposited with the United<br>rst class mail in an envelope<br>s above, or being facsimile |  |
| 11/02/2005 WABDELR3 00000033 10006052   |   |  |   |                       | Robert  | C. Faber   | (Depositor's name)   |  |
| 01 FC:1501 1400.00 DP<br>02 FC:1504 300.00 DP<br>03 FC:8001 30.00 DP  |   |  |   |                       | October   | 26, 2005   | (Signature) (Date)   |  |
| APPLICATION NO.   | FILING DATE   | АТЕ  |   | INVEN                 | NTOR  | ATTORNEY DOCKET NO.  | CONFIRMATION NO.   |  |
| 10/006,052  | 12/06/2001  |  | Jian Wu   |                       |   | P/4076-5   | 9045   |  |
|   | BESTFAVANCA   |  |   |                       |   | <u> </u>   | <b>.</b>   |  |
| ARPLN. TYPE   | SMALL ENTITY  | ISSUE F  |   | Pi                    | UBLICATION FEE  | TOTAL FEE(S) DUE   | DATE DUE   |  |
| nonprovisional  | nonprovisional NO \$14  |  | \$300   |                       | \$300   | \$1700   | 12/08/2005   |  |
| EXAM  | ART UNIT  |  | C   | LASS-SUBCLASS         | ]   | •  |  |  |
| TRINH,  | 3729  |  |   | 029-827000            |   |  |  |  |
| FR 1.363).  ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev.03-02 or more recent) attached. Use of a Customer Number is required. |   |  | 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. |                       |   |  |  |  |
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|   | e assignee category or categor  | ries (will not be pr   | inted on the p  | atent) :              | ☐ Individual ☑ C  | Corporation or other private gr  | roup entity Government   |  |
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| Authorized Signature  | <u>G.</u>   |  | Date  | October 26,           |   |  |  |  |
| Typed or printed name _   |   |  | Registration  | n No. 24,322          |   |  |  |  |
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